

AMHERST HEALTH DEPARTMENT

70 BOLTWOOD WALK • AMHERST • MA • 01002

Office (413) 256-4077 Fax (413) 256-4053

Environmental Health (413) 256-4033

www.amherstma.gov

APPLICATION FOR A PERMIT TO OPERATE A SWIMMING POOL

ANNUAL FEE(S) - SEASONAL \$300.00 - YEAR ROUND \$575.00 - WADING \$75.00

Application is hereby made for a permit to operate a public, semi-public or wading pool. This pool is to be operated according to the minimum standards for swimming pools set forth in Article VI of the Sanitary Code of the Commonwealth of Massachusetts.

OWNER _____ TEL. NO. _____

LOCATION _____

TYPE OF POOL _____ LENGTH _____ WIDTH _____ VOLUME _____

SKETCH _____

SIZE: SWIMMING AREA _____ NON SWIMMING AREA _____ DIVING AREA _____

SOURCE OF WATER _____

DISPOSAL OF SEWAGE AND WASTE WATER _____

TYPE OF FINISH _____ SCUM GUTTER _____

DECK: TYPE AND WIDTH _____ SKIMMERS: WEIR LENGTH _____

TREATMENT SYSTEM (Kind of filters, etc.) _____

DISINFECTION METHOD (Method, type, capacity, quantity, etc.) _____

CHEMICAL TREATMENT (Feeders, capacity, quantity, etc.) _____

REMARKS: (Height of fence enclosure) _____

Gate locked when pool is not open? YES _____ NO _____

ARE LIFEGUARDS PRESENTLY PROVIDED? _____ IF SO, WHAT HOURS? _____

AVERAGE DAILY ATTENDANCE: _____

ENCLOSE A COPY OF ANY RULES AND REGULATIONS FOR POOL USE

DATE _____ SIGNED _____

SANITARIAN

Please Note The Following Late Fees Will Be Enforced

First 30 Days Overdue \$50.00..... 60 Days & Each Month Thereafter \$100.

***ALL ABOVE PERMIT EXPIRE YEARLY ON DECEMBER 31ST**